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Facsimile Transmittal

DATE: December 12, 2005

TO: USPTO

ATTN: AMENDMENT

RE: Serial No. 09/881,868

FAX: 571-273-8300

FROM: George C. Pappas

Number of Pages Sent: 14 (including this transmittal cover sheet)

ATTACHED HERETO PLEASE FIND AN AMENDMENT IN 12
PAGES; TRANSMITTAL FORM (1) PAGE;

PLEASE CALL ME IF YOU HAVE ANY QUESTIONS.

I hereby certify that this correspondence is being sent VIA FACSIMILE to the Commissioner of Patents at fax number (571) 273-8300. Attention Office of Amendments, on:

12/12/05

(Date of Deposit)

Darla D. Kasrudo

(Name of the Person Making the Deposit)

(Signature)

PTO/SB/21

U.S. Department of Commerce
Patent and Trademark Office
PATENT

AMENDMENT TRANSMITTAL FORM

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450Customer No.: 23696
Attorney Docket No.: 010362
In Re Application of: Krishnan
Serial Number: 09/881,868
Filed: 6/15/01
Examiner: Aravind Moorthy
Group Art Unit: 2131

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid
Total*	20	33		x \$50 =	\$0
Independent**	3	4		x \$200=	\$0
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input type="checkbox"/> No				\$360	\$
EXTENSION FEES <input type="checkbox"/> One Month <input type="checkbox"/> Two Months <input type="checkbox"/> Three Months				\$120	\$0
				\$450	\$
				\$1020	\$
TERMINAL DISCLAIMER				\$130	\$
				TOTAL FEE	\$ 0

*If the number in column a is less than 20, enter 0 in column c.

**If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$_____ is enclosed to pay for any claim and/or extension fees.
5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$_____.
- The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: 12/12/05

Signature: George C. Pappas, Reg. No. 35,065
858-651-1306QUALCOMM Incorporated
Attn: Patent Department
5775 Morehouse Drive
San Diego, California 92121-1714
Telephone: (858) 651-1306
Facsimile: (858) 658-2502

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

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Depositor's Name: Daria Kasimova
(type or print name)Signature: 

(TRANSAMD.VER1.13-07/30/03)

Docket: 010362
Appl No: 09/881,868

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of

Chidambaram Krishnan, et al.

Serial No. 09/881,868

Filed: 6/15/01

)

**For: SUBSCRIBER IDENTITY
MODULE VERIFICATION
DURING POWER
MANAGEMENT**

Group No. 2131

AMENDMENT

**Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Dear Sir:

In response to the Office Action dated October 4, 2005, please amend the above-identified application as follows:

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

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Depositor's Name: Darla Kasmedo
(type or print name)

Signature: